



Atty. Dkt. No. 029488-0112

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jay BUA

Title: REDUCTION OF BREAST DENSITY WITH 4-HYDROXY TAMOXIFEN

Appl. No.: 10/734,644

Filing Date: 12/15/2003

Examiner: B. Fetterolf

Art Unit: 1642

Confirmation 9030

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee required for additional claims is calculated below:

	Claims As		Previously		Extra Claims		Additional	
	Amended	Paid For			Present	Rate	Claims Fee	
Total Claims:	25	-	25	=	0	x \$50.00	=	\$0.00
Independent Claims:	2	-	3	=	0	x \$200.00	=	\$0.00
First presentation of any Multiple Dependent Claims:				+	\$360.00	=		\$0.00
					CLAIMS FEE TOTAL	=		\$0.00

[] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[] Extension for response filed within the first month:	\$120.00	\$0.00
[] Extension for response filed within the second month:	\$450.00	\$0.00
[] Extension for response filed within the third month:	\$1,020.00	\$0.00
[] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
	EXTENSION FEE TOTAL:	\$0.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:	\$0.00
[X]	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	Extension Fees Previously Paid:	\$0.00
	TOTAL FEE:	\$0.00

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date July 10, 2007

By Courtenay C. Brinckerhoff

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